## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Aug 15, 2008 8:00 am Secretary of State DOCUMENT # N07000007920 08-15-2008 90002 029 \*\*\*\*70.00 J.D. HALL FOUNDATION, INC. Principal Place of Business Mailing Address 2014 KINGS ROAD 2014 KINGS ROAD IACKSONVILLE, FL 32209 JACKSONVILLE, FL 32209 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08112008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALL, BANITA C 2014 KINGS ROAD Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE, FL 32209 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by September 12, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. CEO ☐ Delete TITLE TITLE Change ☐ Addition HALL, BANITA C NAME STREET ADDRESS 2014 KINGS ROAD STREET ADDRESS JACKSONVILLE, FL 32209 CITY-ST-7IP CITY-ST-7tP COO TITLE ☐ Delete TITLE NAME CLARK, NATASHA S NAME STREET ADDRESS 2014 KINGS ROAD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32209 CITY-ST-ZIP CFO TITLE Delete TITLE Addition NAME HALL, ANTREYLIUS G NAME STREET ADDRESS 9 INMAN STREET STREET ADDRESS CITY-ST-ZIP RUMFORD, RI 09216 CITY-ST-ZIP SEC TITLE ☐ Delete TITLE Addition HALL, CHANITA D NAME NAME STREET ADDRESS 2014 KINGS ROAD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32209 CITY-ST-ZEP SEC TITLE ☐ Delete TITLE ☐ Change ☐ Addition REED, DANITA C NAME NAME 7002 VIDA LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32222 CITY-ST-ZIP ☐ Addition ☐ Delete UILE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

FILED

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all giver like empowered. SIGNATURE: